

EXHIBIT 11

Criminal Docket

Docket Number 1010CR000235

Jonathan G Monsarrat

CRIMINAL DOCKET		DOCKET NUMBER 1010CR000235	NO. OF COUNTS 2	Trial Court of Massachusetts District Court Department																																																																																																																																																									
DEFENDANT NAME AND ADDRESS Jonathan G Monsarrat 197 Summer Street Apt 1 Somerville, MA		DOB 10/14/1968	GENDER Male	COURT NAME & ADDRESS Somerville District Court 175 Fellsway Somerville, MA 02145																																																																																																																																																									
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FIRST FIVE OFFENSE COUNTS																																																																																																																																																													
COUNT 1 2	CODE 138/34 272/53/I	OFFENSE DESCRIPTION LIQUOR TO PERSON UNDER 21, SELL/DELIVER c138 §34 NOISY & DISORDERLY HOUSE, KEEP c272 §53			OFFENSE DATE 01/29/2010 01/29/2010																																																																																																																																																								
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CRIMINAL DOCKET - OFFENSES		DEFENDANT NAME Jonathan G Monsarrat		DOCKET NUMBER 1010CR000235	
COUNT / OFFENSE 1 LIQUOR TO PERSON UNDER 21, SELL/DELIVER c138 §34		DISPOSITION DATE AND JUDGE <i>Singh 5-3-10</i>			
DISPOSITION METHOD		FINE/ASSESSMENT	SURFINE	COSTS	OUI §24D FEE
<input type="checkbox"/> Guilty Plea or <input type="checkbox"/> Admission to Sufficient Facts accepted after colloquy and 278 §29D warning <input type="checkbox"/> Bench Trial <input type="checkbox"/> Jury Trial <input type="checkbox"/> Dismissed upon: <input type="checkbox"/> Request of Commonwealth <input type="checkbox"/> Request of Victim <input type="checkbox"/> Request of Defendant <input type="checkbox"/> Failure to prosecute <input type="checkbox"/> Other: <input type="checkbox"/> Filed with Defendant's consent <input type="checkbox"/> Nolle Prosequi <input type="checkbox"/> Decriminalized (277 §70 C)		HEAD INJURY ASMT	RESTITUTION	V/W ASSESSMENT	BATTERER'S FEE
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FINDING <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Responsible <input type="checkbox"/> Not Responsible <input type="checkbox"/> Probable Cause <input type="checkbox"/> No Probable Cause		FINAL DISPOSITION JUDGE DATE <i>Rynn 8-4-10</i>			
<input type="checkbox"/> Dismissed on recommendation of Probation Dept. <input type="checkbox"/> Probation terminated: defendant discharged <input type="checkbox"/> Sentence or disposition revoked (see cont'd page)					
COUNT / OFFENSE 2 NOISY & DISORDERLY HOUSE, KEEP c272 §53		DISPOSITION DATE AND JUDGE <i>Singh 5-3-10</i>			
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APPLICATION FOR CRIMINAL COMPLAINT		APPLICATION NO. (COURT USE ONLY)	PAGE 1 of 1	Trial Court of Massachusetts District Court Department
<p>I, the undersigned complainant, request that a criminal complaint issue against the accused charging the offense(s) listed below. If the accused HAS NOT BEEN ARRESTED and the charges involve:</p> <p><input type="checkbox"/> ONLY MISDEMEANOR(S), I request a hearing <input type="checkbox"/> WITHOUT NOTICE because of an imminent threat of <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> COMMISSION OF A CRIME <input type="checkbox"/> FLIGHT <input type="checkbox"/> WITH NOTICE to accused.</p> <p><input type="checkbox"/> ONE OR MORE FELONIES, I request a hearing <input type="checkbox"/> WITHOUT NOTICE <input type="checkbox"/> WITH NOTICE to accused.</p> <p><input type="checkbox"/> WARRANT is requested because prosecutor represents that accused may not appear unless arrested.</p>		<p>ARREST STATUS OF ACCUSED <input checked="" type="checkbox"/> HAS <input type="checkbox"/> HAS NOT been arrested</p>		
INFORMATION ABOUT ACCUSED				
<p>NAME (FIRST MI LAST) AND ADDRESS JONATHAN MONSARRAT 197 SUMMER ST 1 SOM MA <i>S 10-17a 10253836</i></p>		BIRTH DATE 10/14/1968	SOCIAL SECURITY NUMBER Redacted	
		PCF NO. 1892866	MARITAL STATUS UNMARRIED	
		DRIVERS LICENSE NO.	STATE	
HAIR BLN	RACE WHITE	COMPLEXION LIGHT	SCARS/MARKS/TATTOOS <i>PAUTUCKET RI</i>	GENDER MALE
		BIRTH STATE OR COUNTRY PAUTUCKET RI		HEIGHT 603
				WEIGHT 260
				EYES BLUE
EMPLOYER/SCHOOL SELF		MOTHER'S MAIDEN NAME (FIRST MI LAST) JANICE		FATHER'S NAME (FIRST MI LAST) PETER
CASE INFORMATION				
COMPLAINANT NAME (FIRST MI LAST) PATROLMAN JONATHAN THERMIDOR		COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		PD SOM
ADDRESS Somerville Police Department		PLACE OF OFFENSE 197 SUMMER ST SOMERVILLE, MA		
		INCIDENT REPORT NO. 10003036	OBTN TSOE201000091	
		CITATION NO(S).		
1	OFFENSE CODE 138/34	DESCRIPTION LIQUOR TO PERSON UNDER 21, SELL, DELIVER C138 S34		OFFENSE DATE 01/29/2010 21:10:00
VARIABLES (e.g. victim name, controlled substance, type and value of property, other variable information; see Complaint Language Manual) Redacted				
2	OFFENSE CODE 272/53/I	DESCRIPTION NOISY AND DISORDERLY HOUSE, KEEP C272 S53		OFFENSE DATE 01/29/2010 21:13:00
VARIABLES				
REMARKS		COMPLAINANT'S SIGNATURE <i>J. Thermidor</i>	DATE FILED 1/29/2010	
COURT USE ONLY	A HEARING UPON THIS COMPLAINT APPLICATION WILL BE HELD AT THE ABOVE COURT ADDRESS ON		DATE OF HEARING	TIME OF HEARING
DATE	PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY)		COURT USE ONLY	
	NOTICE SENT OF CLERK'S HEARING SCHEDULED ON:		CLERK/JUDGE	
	NOTICE SENT OF JUDGE'S HEARING SCHEDULED ON:			
	HEARING CONTINUED TO:			
	APPLICATION DECIDED WITHOUT NOTICE TO ACCUSED BECAUSE: <input type="checkbox"/> IMMINENT THREAT OF <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> CRIME <input type="checkbox"/> FLIGHT BY ACCUSED <input type="checkbox"/> FELONY CHARGED AND POLICE DO NOT REQUEST NOTICE <input type="checkbox"/> FELONY CHARGED BY CIVILIAN; NO NOTICE AT CLERK'S DISCRETION			
DATE	COMPLAINT TO ISSUE		COMPLAINT DENIED	
<i>1/10</i>	<input checked="" type="checkbox"/> PROBABLE CAUSE FOUND FOR ABOVE OFFENSE(S) NO(S). <input checked="" type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. BASED ON <input checked="" type="checkbox"/> FACTS SET FORTH IN ATTACHED STATEMENT(S) <input checked="" type="checkbox"/> TESTIMONY RECORDED: TAPE NO. _____ START NO. _____ END NO. _____ <input type="checkbox"/> WARRANT <input type="checkbox"/> SUMMONS TO ISSUE ARRAIGNMENT DATE: _____		<input type="checkbox"/> NO PROBABLE CAUSE FOUND <input type="checkbox"/> REQUEST OF COMPLAINANT <input type="checkbox"/> FAILURE TO PROSECUTE <input type="checkbox"/> AGREEMENT OF BOTH PARTIES <input type="checkbox"/> OTHER: COMMENT	